

PART B - FEE(S) TRANSMITTAL

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7590 05/01/2002

JOYCE KOSINSKI
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655 DEEP VALLEY DRIVE - SUITE 303
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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above, or being facsimile transmitted to the USPTO, on the date indicated below.

J. E. Kosinski (Depositor's name)
J. E. Kosinski (Signature)
June 4, 2002 (Date)

APPLICATION NO.	FILED DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/356,997	07/20/1999	JOHN C. THACKER	CY-98055	8562

TITLE OF INVENTION: METHOD AND APPARATUS FOR INTERNET CACHE CONTENT DELIVERY VIA A DATA DISTRIBUTION SYSTEM

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
Provisional	NO	\$1280	\$0	\$1280	08/01/2002

EXAMINER	ART. UNIT	CLASS-SUBCLASS
NAJJAR, SALEH	2154	709-235000

A. Change of correspondence address or indication of "Fee Address" (37

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Kenneth W. Float

2

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

CyberStar, L.P.

Palo Alto, California

Please check the appropriate assignee category or categories (will not be printed on the patent)

☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee☒ Advance Order - # of Copies 15

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☒ A check in the amount of the fee(s) is enclosed. \$1,325.00☐ Payment by credit card. Form PTO-2038 is attached.☐ The Commissioner is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).

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(Authorized Signature)

(Date)

Anthony W. Karambelas, 25,657

5/31/02

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01 FC142
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